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LETTERS TO THE EDITOR

Note: The Editor is not responsible for opinions expressed in this department. All communications must be accompanied by the name and address of the writer.

THE PROBLEM OF THE PRIVATE DUTY NURSE

(Extracts from Letters Received)

I.

Dear Editor: Permit me to thank you for your most timely editorial, *The Sphere of the Private Duty Nurse*. One year's experience of private duty, during my ten years in the profession, has made me feel very keenly the injustice of referring to this group of workers in the contemptuous manner that we and the public health nurses have done so frequently of late. It is truly a disloyal, dangerous practice.

Nebraska

A SUPERINTENDENT OF NURSES.

II.

Dear Editor: Times of stress usually reveal human nature as it is, both admirable and unworthy, and the late influenza epidemic has taught the nursing profession some new phases of its duties toward the public and the medical profession. If the critic in the *A. M. A. Journal* thinks the graduate nurse is getting what is coming to her, there is a little something to be said about the public and the physicians "getting theirs." Last October, at the call from a state cantonment for volunteer nurses to help in the epidemic, scores of nurses from a dozen cities responded as promptly as possible, leaving their cases, their hospital and their families, to care for the soldiers. Many were taken ill, a few of the volunteers died, but a very small percentage, luckily, for there was no money nor service spared in caring well for all the nurses at camp. I was one of the volunteers (a Home Defense Nurse), who served for three weeks during the height of the epidemic, working from ten to fifteen hours daily as hard as was physically possible. So far as I know the nurses were very glad to give their services to the Government in time of need for \$75.00 per month and maintenance, which is little more than half what they could have earned at the same time in civilian life. Care and not dollars would save men's lives. After leaving camp I spent two months more in army work at the Student Training Camp at an agricultural college, until the boys were mustered out. We were given excellent accommodations and good food and not excessively hard work there. Then the need for volunteer help became very urgent among civilians in L.—, because of the epidemic, and two Army Nurses from camp were sent for by the local Health Board to help clean up, organize and run an Emergency Hospital. The only available building for the purpose was an abandoned "Hobo Inn," as it was known locally, and it certainly did need some cleaning and readjustment to make it fit for hospital purposes. But the nurses worked hard and faithfully from twelve to fifteen hours daily for two weeks, caring for from twenty to thirty-five patients, most of them critically ill. The patients were scattered in eight different rooms on two floors, which did not add to the facility in caring for delirious cases. For this service rendered to the city, the Health Board paid \$3.22 a day, or at the rate of \$100.00 per month, to each nurse, the nurses paying their own board, hotel and laundry bills. When one graduate nurse from the city refused her check at that rate, they paid her nothing at all,

and it is a physician who runs the Health Board. If one graduate nurse charged \$50 per week for caring for two children, another that I know well received \$15.00 for caring for two children with influenza in a physician's family. In another physician's family, where a nurse cared for an obstetrical case for sixteen days and had the oversight of two small children, day and night, the patient (the physician's wife), was very angry that she charged \$54.00. Maybe private duty is "the line of least resistance" to many nurses and maybe private duty nurses are only "wage earners," but from eight years' experience along that line, I am convinced that it takes some versatility for a woman to adapt herself to and live with all classes of patients in country, town, or city, and to do anything and everything as emergencies arise, to keep a home comfortable and peaceful for her patient. She may in turn be not only nurse, friend, and teacher, but occasions arise when she may be temporary housekeeper, laundress, cook, house-maid, lady's maid, valet, furnace caretaker, chauffeur or even stable worker. I know, for I have tried them all at different times myself. The irregular hours of duty, irregular living conditions and, not least important, irregular pay, make the life of the conscientious private duty nurse not wholly a bed of roses. To return to the question of pay,—why should a professional nurse be expected to be more patriotic in the matter of demanding increased pay for her services during and after war conditions, than other professional people or common laborers? Physicians have increased their fees, salaried workers demand and get more for the same services than they did three years ago, and living expenses have increased 115 per cent. Why should a nurse work for less than she can afford, with careful economy, to live on and save some for the inevitable "rainy day?" It may be "labor union methods," but I fail to see why a nurse should be less businesslike than a plumber, because she deals with human life and happiness instead of other essentials. To work for the sake of high minded patriotism or charity is all right for a while, but a nurse's bills have to be met with ready cash, generally.

Michigan. M. S.

III.

Dear Editor: I am glad the Editor came to the defense of the private duty nurse, for when I read in the March number of the *Journal*, The Industrial Nurse, I almost became indignant; not so much because I was personally offended, being one of the poor "wage earners" myself, but when I think of the hundreds of fine, capable women in the ranks of Private Duty Nursing who are a godsend both to the poor and rich alike, my otherwise even temper became somewhat ruffled. I consider the private duty nurse, if she is conscientious, as much of a teacher as the Institutional, Industrial or Public Health nurse. Of course her field is not so large, but it is just as important and her mission cannot be filled by any of these others, however momentous (and all admit that), their work may be. Take, for instance, a poor family in the country, miles and miles from the doctor, four of whom are stricken with typhoid. She works faithfully almost day and night, catching what moments of sleep and rest she can, knowing that inability to do her duty may cost one of these precious lives. If the panic-stricken husband and father is not able to secure the services of a cook at the outset, she attends to the making of liquid foods, broths, etc., for her patients, and swallows raw eggs and manages to gulp down the indigestible bread and boiled cabbage which the twelve-year-old child of the family has so heroically prepared, knowing that her own physical strength must be maintained to care for her charges. And she must teach the husband *not* to wash his dishes in the basin on the back porch, used for the hands (that is no fairy tale, for I've seen it done), and must instruct

the twelve-year-old daughter, who is mothering a six months' old baby sister, that it is not good for the baby to administer soothing syrups to make it sleep. The nurse must prepare baby's food and teach the child the necessity of cleanliness of nipples and bottles. And when at last the black cook does arrive (she is only intrusted with the cooking for the well ones), there are many things to be shown her, and with her help the nurse scrubs all the floors and puts the house in apple-pie order, hence teaching sanitation. As for "taking temperature and giving sponge baths" being belittled, sometimes the very life of the patient depends upon these things being done faithfully and accurately. And who but a private duty nurse knows the wholesome satisfaction and "respectable" feeling of bathing the patient and tidying the bed before the arrival of the doctor in the morning, to say nothing of the satisfaction and appreciation of the patient who is prepared to meet the doctor with a smile and tell him or her, she feels the battle is worth striving for. Oh yes, army of patient workers, it is just these little things bravely and faithfully carried out, that count so much to you, and countless numbers will rise up and call you blessed, for the performance of duties which seemingly in themselves are trivial. Then there is the long, hopeless case,—who will gainsay that the nurse's personality counts even more than the ability to teach? She will need to know something of psychology, with the happy faculty of putting herself in the place of her patient, to bear patiently and smilingly the many whims and caprices of a suffering and distorted mind, perhaps. And most of all, she will need to cultivate the spiritual side. She herself must know the meaning of a strong and undimmed faith in our heavenly Father, the giver of all good, and be able to impart to her patient something of the joys that her religion gives her in this practical workaday world of ours. Dear me! did I say spiritual, most of all? Then I must combine humor with that most coveted virtue, for she cannot save the day nor scarcely her soul, if she does not possess to a very full degree, the felicitous ability to see the funny side of life,—of laughing away the little but irritating annoyances that beset even the most complacent, at times.

North Carolina

E. J. S.

IV.

Dear Editor: "What's the matter with the trained nurse?" What's the matter with the doctors and the people, we should say. Just because we are being paid \$28 a week, the people and some of the doctors, who should stand by us as loyally as we have by them are trying to work the very life out of us to get their money's worth. I had recently a very sick patient, a pregnant woman, with influenza,—for three nights I only removed my shoes, she kept me busy every half hour, and I was asked to do, also, the cooking for the men. I know of a nurse who was told to do the three weeks' laundry for a family of five, also the cooking, though she was up four and five times each night. We do not have horse strength. How can we lose so much sleep and do such heavy work? I am on a case now where a trained nurse was needed for only thirty-six hours, but this is my sixth week. The lady has no servants, gets up late and is gone all day or entertains friends until late at night. There are four little girls, the eldest seven. Now who is doing all the work in that house? I am not worrying, if they want to pay me \$28 a week for this kind of work, it is up to them.

Massachusetts

G. C. D.

(It is one thing to lend a hand to necessary household tasks in times of illness and great stress; it is another thing to continue in a household when

one's professional duties are ended, just because one is well paid for doing so. Criticism is brought upon the Private Duty Group by just such situations as the last one described in this letter.—Ed.)

ETIQUETTE FOR OFFICERS OF THE POST, AS A NURSE SEES IT

Dear Editor: I thought at this time, when the subject of Rank for Nurses is being widely discussed, you would be interested in seeing the following Rules for Etiquette which I cut from an Army Post magazine:

"With humble apologies to the very few to whom this does not apply: 1. Officers should always enter the bus first, especially when there is a group of nurses waiting. 2. On rainy days inside seats are reserved for officers. The nurses enjoy the rain. 3. Ward surgeons to have no conversation with the nurses in charge, all communications to be written and left on desk. 4. Never offer a graduate nurse a chair, they do enjoy standing. 5. When addressing a nurse—put your feet on the desk, lean back and be comfortable. They are getting used to it. 6. When nothing else to do take a trip up the ward and look for dirt, you will find it. 7. When an operation is to be performed, never notify the operating room, it might be ready. 8. Never do dressings in the morning. The nurses enjoy doing them in the afternoon. 9. When addressing nurse in charge of ward, never call her by name, just yell 'Nurse' and see what happens. 10. Never ask a nurse about her patients, she might be able to give you some information. 11. If in doubt about the use of the two little words 'please' and 'thank you,' consult Webster, as these words are apparently becoming obsolete in the Army. 12. If you see any candy on the desk, help yourself, but don't ever bring any. 13. Whenever possible, all cigarette ashes and butts are to be scattered around the desk, as it almost makes us feel at home. 14. When all is said and done, and you come to the end of a busy day, bid the nurse 'Good-night' and smile, even if it hurts at first. 15. Co-operation is needed, any suggestions, rules or regulations for graduate nurses will be cheerfully received and acted upon if possible. Here is your chance; knock back."

From Home Again.

THE HIGHER MISSION OF THE ARMY NURSE

Dear Editor: Someone said to me recently, "Army nurses have lost the true spirit, they are no longer interested in their work and are making every effort to return to civilian life." Personally, I cannot believe that our nurses have lost the spirit of service, and that they, in this huge task of reconstruction, will fail to "carry on." I am convinced that, with a few exceptions, the nurses, who have served with me during the past year, are still filled with the same spirit and enthusiasm with which they entered the service. Now that hostilities are over, those who enrolled with a purely selfish motive, naturally do not view the tremendous task before them and their great privilege as nurses, in the true light. The men who are returning to our hospitals have, unconsciously perhaps, raised for themselves the standard of womanhood as depicted in the daily service rendered by our splendid American nurses at the front. Shall we, who through no lack of patriotism, felt it our duty to serve over here, fail to measure up to this standard? Shall we not "carry on" as long as the Government needs our services, even until the last man has returned and has been restored to his full capacity for service? This stupendous work of reconstruction, unheard of in any previous war, has just begun in our country, and we have the privilege of sharing in it in